



IDAHO DEPARTMENT OF
HEALTH & WELFARE

FILE COPY

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April 9, 2007

Jill Garrett
Hands Of Hope Hospice
1379 East 17th Street
Idaho Falls, ID 83401

Provider #: 131547

Dear Ms. Garrett:

On **March 27, 2007**, a Complaint Investigation was conducted at Hands Of Hope Hospice. The complaint allegations, findings, and conclusions are as follows:

Complaint #ID00002549

Allegation: The hospice agency is providing services to patients that do not qualify.

Findings: An unannounced visit was made to investigate the complaint. During the investigation, clinical records were reviewed.

Clinical records for 12 of 30 current patients were reviewed. The 12 patients resided in five different Assisted Living Facilities. Each patient's record contained a signed physician's order for admission to hospice services. The records each contained signatures of the patient's attending physician and hospice medical director certifying the patient as having a terminal illness, as well as, recertifications of terminal illness at required time frames. Patients who were admitted with non-cancer diagnoses had been evaluated using the Karnofsky Scale to determine level of dependence and debility, supporting the patients' diagnoses and need for hospice services.

Conclusion: Unsubstantiated. Lack of sufficient evidence.
No issues were identified and no deficiencies were cited.

Hands Of Hope Hospice

April 9, 2007

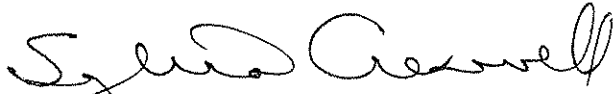
Page 2 of 2

As none of the complaints were substantiated, no response is necessary. Thank you for the courtesies and assistance extended to us during our visit.

Sincerely,



PENNY SALOW
Health Facility Surveyor
Non-Long Term Care



SYLVIA CRESWELL
Supervisor
Non-Long Term Care

PS/mlw